Service	Service Code(s)	Description of Service	Utilization Management
		Treatment Services	
Substance Abuse Assessment	H0001	The assessment process provides an accurate diagnosis along with recommendations for follow-up or care. Recommendations may include addiction treatment or referrals to physical and mental health practitioners, family counselors, or other helping professionals. Completed Addiction Severity Index. *If a CADC-I completes the assessment it will not be counted completed until it has been reviewed and approved by the clinical supervisor.	Duration: NA Frequency: NA Amount: One (1) assessment at admission and one (1) assessment at discharge. Four (4) assessment cap per client per
Level 0.5 Early Intervention/ Prevention	Not a SAPTA covered service/Certif ied Only	Level 0.5 services can occur in any appropriate setting as defined by ASAM Third Edition. Interventions may involve individual, group, or family counseling as well as other interventions delivered by the appropriate clinician. Level 0.5 constitutes a service for specific individuals who, for a specific reason, are at risk of developing substance-related or addictive behavior problems or those for whom the is not sufficient information to document a substance is or addictive disorder. This care approximates ASAM Criteria, Third Edition.	year. Not Covered By SAPTA/Certified Only
Level I Outpatient Services	Individuals: H0047 Group: H0005	Non-residential specialized services on a scheduled basis for individuals with substance abuse problems or use disorders. Level I outpatient substance abuse services are provided in a SAPTA certified Outpatient facility which provides regularly scheduled individual, group and/or licensed family counseling. The program must provide, but is not limited to, professionally directed assessment/evaluation, group counseling, education, skill building, case management and individual counseling. Services may be provided to patients discharged from a more intensive level of care or for clients who are resistant to treatment or higher levels of care, but are not necessarily limited to this. This care approximates ASAM Criteria, Third Edition. Services: Substance abuse assessment Comprehensive Evaluations (by the appropriately licensed staff) Individualized Treatment Planning Individual, group, and/or family therapy Family: To be included during course of treatment as clinically indicated Family education and information sessions as clinically indicated	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 90 days in one year Frequency: Up to three (3) sessions per week. Amount: Not to exceed a total of 60 sessions in one year

		*Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services.	
2.1 Intensive Outpatient Treatment	H0015	Non-residential specialized services on a scheduled basis for individuals with substance abuse problems or use disorders Intensive Outpatient (IOP) Substance abuse treatment is provided in a certified Level II facility which provides a broad range of highly clinically intensive clinical interventions. The program must provide but is not limited to professionally directed evaluation, group counseling, education, skill building, case management, and individual counseling. Services are provided in a structured environment for no less than nine (9) hours per week. Request for more than twelve (12) hours per week of services must be pre-approved. This care approximates ASAM Criteria, Third Edition A minimum of three (3) hours of treatment services must be provided on each billable day and include one individual session per week. IOP treatment will generally include intensive, moderate and step down components. Services: Substance abuse assessments Comprehensive Evaluations (by the appropriately licensed staff) Individualized treatment planning Individual, group, and/or family therapy Family: To be included during course of treatment as clinically indicated Medical and psychiatric consultation Psychoparmacological consultation Medication management 24 hour crisis management Psychoeducation: Didactic sessions Family education and information sessions as clinically indicated *Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed six (6) weeks. Frequency: Up to four (4) sessions per week. A minimum of three (3) hours of treatment services must be provided on each billable day and include one individual session per week. A maximum of 12 hours of services will be allowed per week. Amount: Not to exceed a total of 40 sessions

			Effective
3.1-Low Intensity/Short Term Residential	SAPTA	Low Intensity/Short term residential facilities provide living accommodations in a structured environment that encourages each client to assume responsibility for their own rehabilitation. Low-intensity residential treatment is provided in a licensed residential facility which provides room, board, and didactic evidence based services designed to apply recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the individual into work, education and family life. A minimum of 5 hours per week of structured activities must be provided on each billable week. This care approximates ASAM Criteria, Third Edition *Must be licensed by BHCQC Medical Services: Must be provided as per licensing requirements.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 30 days. Frequency: A minimum of 5 hours per week of structured activities must be provided on each billable week.
		Services: Basic Skills Training Transportation Peer to Peer Medication Management (if necessary) Medical Services (these services must be available per licensing requirements Treatment and adjunct services shall not be provided but can be arranged for by the program if medically necessary. Treatment services can be provided by treatment providers outside of the program. Half-way House Facilities shall encourage use of community resources by persons recovering from alcohol/drug use. There shall be written provisions for medical screening, care of clients requiring minor treatment or first aid and handling of medical emergencies. Structured Activities: Employment Vocational training Recovery Support Services Recreation Regular monitoring of medication adherence Opportunities for the client to be introduced to the potential benefits of addiction pharmacotherapy as a tool to manage his or her addictive disorder. *Self-help meetings may be included as part of structured activities	Amount: Not to exceed two (3) episodes per year per client.

		Staffing: A staff person shall be available to residents twenty-four (24) hours per day. The client staff ratio shall not exceed twelve (12) clients to one (1) staff person	
		The client/ staff ratio shall not exceed twelve (12) clients to one (1) staff person.	
		The staff shall be composed of:	
		• A house manager; and	
2.5 Clinically	CADTA	Other staff sufficient to meet the client/staff standard. Per ASAM Criteria Layel 2.5 Adult is a clinically managed high intensity residential.	Intensity of complex is
3.5 Clinically Managed Medium-High Intensity	SAPTA	Per ASAM Criteria, Level 3.5 Adult, is a clinically managed high-intensity residential program that are designed to serve individuals who, because of specific functional limitations, need safe and stable living environments in order to develop and/or demonstrate sufficient recovery skills so that they do not immediately relapse or continue to use in an imminently dangerous manner upon transfer to a less intensive level of care. Effective treatment approaches are rehabilitative in focus, addressing the patient's educational and vocational limitations, as well as his or her socially dysfunctional behavior, until the patient can be stabilized and is appropriately transferred to a less intensive level of care. A unit consists of one day (24 hour period. Clinically managed high intensity residential includes no less than 25 hours per week of counseling interventions. A minimum of 7 hours per day of structured activities must be provided on each billable day. Intervention focuses on reintegration into the greater community with particular emphasis on education and vocational development. This care approximates ASAM Criteria Third Edition	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: 30 day maximum length of stay. Amount: Not to exceed two (3) episodes per year per client.
		*Must be licensed by BHCQC Services: Substance abuse assessment 4 dour crisis management Medical, psychiatric, psychological, services, which are available onsite or through consultation or referral. Medical and psychiatric consultation are available within 24 hours by telephone or in person, within a time frame appropriate to the severity and urgency of the consultation Individual, group, and/or family therapy Family therapy: To be included during course of treatment as clinically indicated Basic Skills Training Transportation Peer to Peer Medication Management (if necessary) Medical Services (these services must be available as per licensing	

		requirements) Crisis Intervention (doesn't count against the required minimum service hours) Psychosocial rehabilitation Structured Activities: 7 hours a day required. Example of activities: Motivational therapies and other evidence based practices are used. Counseling Services Psycho education Employment Vocational training Recovery Support Services Recreation Random drug screenings *Self-help meetings may be included as part of structured activities Medical Services: Must be provided as per licensing requirements	
OMT	Individuals: H0047 Group: H0005	Opioid Maintenance Therapy (OMT) is an opioid substitution therapy certified by the Division in the State of Nevada. This level of service provides opioid substitution therapy on an outpatient basis. Clients appropriate for this level of care must meet the current DSM diagnostic criteria for opioid use disorder prior to being considered for admission. The Division supports programs offering the OMT service encouraging Level 1 outpatient attendance by clients in extending good faith offerings in the form of motivational strategies for client engagement. Client needs in conjunction with the substitution therapy are of concern to the Division, which supports a well-integrated intervention for this client population. This care approximates ASAM Criteria Third Edition OMT. The OMT service level functions under a set of well-defined state and federal law regulations as set forth in Federal Drug Administration (FDA) 21 C.F.R., Part 291and facilities are licensed under the Health Division. It is the intent of this service level to regulate "doses" of methadone or other opioid substitutes for maximum benefit to the client. Opioid substitute regimens are carefully weighed on an individual client basis in relation to treatment plans supporting total abstinence or perhaps a more general harm reduction approach. Integrated strategies involving the Level I outpatient and the ambulatory detoxification service levels often determine the proper treatment planning approach for each individual client.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Ongoing Frequency: Up to five (5) contacts per week. Amount: One (1) hour of clinical services maximum per week.

The ambulatory detoxification addresses detoxifications from alcohol, sedatives, hypnotics, opioids, and anxiolytics. It is an organized outpatient service, which may be delivered in an office setting, health care or addiction treatment facility by trained clinicians who provide medically supervised evaluation, detoxification and referral services according to a pre-determined schedule. Such services are provided in regularly scheduled sessions and delivered under a defined set of policies and procedures for medically supervised withdrawal.

As a level of care, OMT can exist as a separate "unbundled" and freestanding service or as a "bundled" level of care on a full program continuum where it can be attached to any level of care approved by the Division of Public & Behavioral Health in the State of Nevada.

For program that use methadone for maintenance and/or detoxification must be accredited by a recognized accreditation body, approved by SAMHSA, comply with all rules enforced by the Drug Enforcement Administration (DEA) and is licensed by the Health Division.

Opioid services function under a defined set of policies and procedures as stipulated by state law and federal regulations as set forth in FDA 21 CFR Part 291. A unit consists of one week of dosage and accompanying maintenance services (e.g. peer to peer).

Required Staff:

<u>Medical Director</u>: Licensed in the state of Nevada as a physician, certification in Addiction Medicine (ASAM, Addiction Psychiatry, or American Osteopathic Association) is preferred. Membership in ASAM is required. Nursing Director: Registered Nurse (RN) currently licensed in Nevada with one year of experience in Addictions treatment.

Required Medical Services:

- Full assessment with physical examination at admission and annually thereafter
- Regular urine drug screens
- Peer to peer
- Pregnancy screen at intake for women of child-bearing age
- Regular review of medication by physician and prescription adjustments as medically determined
- Level I and II outpatient services as needed

Required Counseling Services: At minimum, methadone treatment delivered in a Licensed Methadone Treatment program must adhere to the counseling standards and provide Level I or Level II services which are based on medical necessity and client

		need at the beginning of the treatment episode.	
		Methadone can be administered in conjunction with other clinical services across all levels of care provided by a DAS licensed Substance Abuse treatment program. All counseling requirements must be in accordance with the licensing requirements for that level of care.	
Level 3.2-WM Clinically Managed Residential Withdrawal Management	SAPTA	This care approximates ASAM Criteria Third Edition, Level 3,2-WM social withdrawal management and is a clinically managed withdrawal management service designed to explicitly to safely assist patients through withdrawal without the need for ready onsite access to medical and nursing personnel. This Level provides care to patients whose intoxication/withdrawal signs and symptoms are sufficiently severe to require 24-hour structure and support. At least one employee must be present 24 hours a day with appropriate clinical physician approved protocols. Protocols must also identify patients who are in need of medical services beyond the capacity of the social setting detoxification facility. Facilities that supervise self-administered medications have appropriately licensed or credentialed staff and policies and procedures in accordance with state and federal law. A unit consists of one day (24 hour period). *Must be licensed by BHCQC Services: • A range of cognitive, behavioral, medical, mental health, and pother therapies are administered to the patient on an individual or group basis. These are designed to enhance the patients understanding of addiction, the completion withdrawal management process, and referral to an appropriate level of care for continuing treatment. • Interdisciplinary individualized assessment and treatment plan. • Health education services • Services to family and significant others. • Individual counseling • Group Sessions • Basic Skills training • Crisis Intervention	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed five (5) days unless medically necessary Frequency: NA Amount: Not to exceed three (3) visits per year.
Level 3.7-WM Medically Monitored Inpatient Withdrawal Management	SAPTA does not currently cover this service	Medically Monitored Inpatient Detoxification Enhanced is an organized service delivered by medical and nursing professionals, who are available 24 hours a day by telephone. Which provides 24-hour medically supervised evaluation and withdrawal management in a permanent facility with inpatient beds. Services are delivered under a defined set of physician-approved policies and physician-monitored procedures for clinical protocols. This level provides care to patients whose withdrawal signs and	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary.

symptoms are sufficiently severe enough to require 24-hour inpatient care. This care approximates ASAM Criteria, Third Edition care but enhances that level to include the ability to treat the following:

- Individuals with co-occurring disorders,
- Pregnant women
 Poly-addicted persons including those addicted to benzodiazepines,
- Individuals who may or may not be on opiate replacement therapy.
- Clients with non–life-threatening medical condition(s) that do not require the services of an acute care hospital.

*In order to accommodate this increased acuity in patients being treated in this service, the facility must have an affiliation agreement and procedures in place with an acute care hospital that ensures the seamless transfer of the client to the acute care setting, if clinically necessary.

*Must be licensed by BHCQC

Required Medical Services:

- Full medical assessment
- A physical examination by a physician, physician's assistant, or nurse practitioner as part of the initial assessment, if self administered withdrawal management medications are to be used. Interdisciplinary individualized assessment and treatment plan.
- Ongoing medical services including medication monitoring
- Pregnancy test for all women
- 24 hour nursing services
- 24 hour access to physician

Services:

- Addiction focused history, obtained as part of the initial assessment and reviewed by the physician during the admission process.
- Sufficient bio psycho social screening assessment to determine the level of care in which the client should be placed and for the individualized care plan to address treatment priorities in Dimension 2 through 6.An individualized treatment plan including problem identification in Dimensions 2 through 6 and development of treatment goals and measurable treatment objectives and activities designed to meet these objectives.
- Daily assessment of the client's progress through withdrawal management and treatment changes.
- Discharge /transfer planning, beginning at admission.
- Referral arrangements documented as needed.
- Substance abuse assessment

Duration: Not to exceed five (5) days unless medically necessary

Frequency: Daily

Amount: Not to exceed three (3) visits per year.

		 Individual counseling Group Sessions Basic Skills training Crisis Intervention (doesn't count against the required minimum service hours) WM programs include progress notes in the patient record that clearly reflect implementation of the treatment plan and the patient's response to treatment, as well as subsequent amendments to the plan. Co-occurring Services included as part of this service: Case Management 	
		 Medication Monitoring Required Staff: Must be provided in the facility under the supervision of a Medical Director. All other licensing requirements for medical services and co-occurring services must be followed. Medical staff include: Physicians who are available 24 hours a day by telephone Physician who is able to access the client within 24 hours of admission, or earlier if there is medical need and is available to provide on-site monitoring if needed. An RN or other credentialed nurse is available to conduct a nursing assessment at admission A nurse who is responsible for overseeing or monitoring the client's progress and to provide medication administration on an hourly basis if applicable. 	
Level 4-WM Medically Managed Intensive Inpatient Withdrawal Management Detoxification (Adults/Adolescen ts)	Not Covered By SAPTA/Certi fied Only	Level 4-WM detoxification is an organized service delivered by medical and nursing professionals that provides for 24-hour medically directed evaluation and withdrawal management in an acute care inpatient setting. Services are delivered under a defined set of physician-approved policies and physician-managed procedures or medical protocols. Level 4-WM provides care to patients whose withdrawal signs and symptoms are sufficiently severe to require primary medical and nursing care services. Twenty-four hour observation, monitoring and treatment are available. Although Level 4-WM is specifically designed for acute medical detoxification, it is also important to assess the patient and develop a care plan for any treatment priorities identified. Bureau of Health Care Quality and Compliance Nevada Administrative Code 449.060 define "Medically managed intensive detoxification program" as program which provides 24-hour medical monitoring of treatment and detoxification services in a licensed hospital pursuant to NAC 449.279 to 449.394, inclusive, and which has life	Not Covered By SAPTA/Certified Only

		support systems in place. This care approximates ASAM Criteria, Third Edition.	
Transitional Housing	H0019	Transition services consist of a supportive living environment for individuals who are receiving substance abuse treatment in an Intensive Outpatient, or Outpatient program and who are without appropriate living alternatives. The program activities are focused on problems in applying recovery skills, and should include but are not limited to referral and linkage, referral and coordination of care, client support and advocacy, self help meetings, monitoring and follow-up. This is the level that can only be reported for in conjunction with another level of treatment being provided at the same time (e.g. Level I or Level II.I outpatient. Frequency and service limits will depend on the level of care utilized; the ideal situation is that the client progress through a care continuum. A unit consists of one day (24 hour period).* Must meet HCQC requirements for licensure.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 180 days for one episode. Frequency: Daily. Amount: Not to exceed two (2) episodes per year. Prior authorization will be
Civil Protective	H0013	Adult: Program provides 24-hour residential supervision to adults remanded to the	required for all placements following the first episode Intensity of service is
Custody	220020	custody of the program by law enforcement personnel pursuant to the provisions of NRS 458. A unit consists of up to one day (24 hour period).* Adolescent: Program provides 24-hour residential supervision to adolescents remanded to the custody of the program by law enforcement personnel due to intoxication. For those clients who exhibit symptoms of withdrawal, detoxification services are provided. All clients are provided referrals and coordination of care as clinically indicated. A unit consists of up to one day (24 hour period).*	dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed three (3) days Frequency: NA
			Amount: Not to exceed three (3) CPC placements per year.

Service	Service Code(s)	Description of Service	Utilization Management
	, ,	COD Services	
Comprehensive Evaluation	90791	A comprehensive assessment for the purpose of identifying co-occurring mental health and substance use disorders. The evaluator must be dually licensed as a CADC/LADC and holding a clinical mental health license. LCADCs can also conduct an evaluation.	Screening for Mental Health Disorder Required Prior to Billing for this service
		Programs must be certified to administer comprehensive evaluations as identified by SAPTA's COD policy.	Duration: NA
			Frequency:
		*Evaluations must be completed by a clinician within their scope of practice. (dually licensed)	Amount: One (1) assessment at admission and one (1) assessment at discharge. Six (6) assessment cap per year.
Level I Outpatient	Individual: 90834 Group: 90853	See Level I Service Description and SAPTA's COD policy. Program must be certified as co-occurring enhanced as identified by SAPTA's COD policy. Staff providing the service must credentialed as a MFT or LCSW and be in their scope of work to provide co-occurring services,	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary.
		Client must have a co-occurring mental health diagnosis	Duration: Not to exceed 60 days
			Frequency: Up to three (3) sessions per week.
			Amount: Not to exceed a total of 36 sessions
Level II	Individual:	See Level II.1 Service Description and SAPTA's COD policy for services and	Duration: Not to exceed six
Outpatient-IOP	90834 Group:	admission criteria.	(6) weeks.
	90853	Program must be certified as co-occurring enhanced as identified by SAPTA's COD policy.	Frequency: Up to four (4) sessions per week. A
		Client must have a co-occurring mental health diagnosis.	minimum of three (3) hours of treatment services

Service	Service Code(s)	Description of Service	must be provided on each billable day and include one individual session per week. A maximum of 12 hours of services will be allowed per week. Amount: Not to exceed a total of 28 sessions Utilization Management
	Code(s)	Adolescent Services	
Level I Outpatient Adolescent	Individuals: H0047 Group: H0005	Non-residential specialized services on a scheduled basis for individuals with substance abuse problems or use disorders. Level I outpatient substance abuse services are provided in a SAPTA certified Outpatient facility which provides regularly scheduled individual, group and/or licensed family counseling. The program must provide, but is not limited to, professionally directed screening, evaluation, treatment, and ongoing recovery and disease management services for individuals between the age of 13 and 18 with substance abuse problems. Additionally, the program must provide but is not limited to professionally directed evaluation, group counseling, education, skill building, case management and individual counseling. A minimum of one individual counseling session must be offered to the client monthly group counseling, education, skill building, case management and individual counseling. Services may be provided to patients discharged from a more intensive level of care or for clients who are resistant to treatment or higher levels of care, but are not necessarily limited to this. This care approximates ASAM Criteria, Third Edition. Services: Substance abuse assessment Comprehensive Evaluations (by the appropriately licensed staff) Individual; group, and/or family therapy Individual, group, and/or family therapy Family: To be included during course of treatment as clinically indicated *Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 90 days in one year Frequency: Up to three (3) sessions per week. Amount: Not to exceed a total of 60 sessions in one year

2.1 Intensive Outpatient Treatment Adolescent	H0015	Non-residential specialized services on a scheduled basis for individuals with substance abuse problems or use disorders Intensive Outpatient (IOP) Substance abuse treatment is provided in a certified Level II adolescent facility which provides a broad range of highly clinically intensive clinical interventions. The program must provide but is not limited to professionally directed evaluation, group counseling, education, skill building, case management, individual counseling, about addiction-related and mental health problems that are between the age of 13 and 18 years of age. Services are provided in a structured environment for no less than six (6) hours per week, a unit consist of two hours of treatment. This care approximates ASAM Criteria, Third Edition A minimum of two (2) hours of treatment services must be provided on each billable day and include one individual session per week. IOP treatment will generally include intensive, moderate and step down components. Services: Services: Substance abuse assessments Comprehensive Evaluations (by the appropriately licensed staff) Individualized treatment planning Individual; group, and/or family therapy Family: To be included during course of treatment as clinically indicated Medical and psychiatric consultation Psychopharmacological consultation Medication management 24 hour crisis management Psychoeducation: Didactic sessions Family education and information sessions as clinically indicated *Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed six (6) weeks. Frequency: Up to four (4) sessions per week. A minimum of three (2) hours of treatment services must be provided on each billable day and include one individual session per week. A maximum of 8 hours of services will be allowed per week. Amount: Not to exceed a total of 40 sessions
3.1-Low Intensity/Short Term Residential Adolescent	SAPTA	Low Intensity/Short term residential facilities provide living accommodations in a structured environment that encourages each adolescent to assume responsibility for their own rehabilitation between the ages of 13 and 18. Low-intensity residential treatment is provided in a licensed residential facility which provides room, board, and didactic evidence based services designed to apply recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the individual into work, education and family life. A minimum of 5 hours per week of structured activities must be provided on each billable week.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 30 days.

This care approximates ASAM Criteria, Third Edition *Must be licensed by BHCQC

Medical Services: Must be provided as per licensing requirements.

Services:

- Basic Skills Training
- Transportation
- Peer to Peer
- Medication Management (Adolescent specific if necessary)
- Medical Services (these services must be available per licensing requirements
- Treatment and adjunct services shall not be provided but can be arranged for by the program if medically necessary.
 - *Treatment services can be provided by treatment providers outside of the program.
- Half-way House Facilities shall encourage use of community resources by adolescent recovering from alcohol/drug use.
- There shall be written provisions for medical screening, care of clients requiring minor treatment or first aid and handling of medical emergencies.
- Structured Activities:
 - Employment
 - Vocational training
 - Recovery Support Services
 - Recreation
 - Regular monitoring of medication adherence
 - Opportunities for the client to be introduced to the potential benefits of addiction pharmacotherapy as a tool to manage his or her addictive disorder.

Staffing:

A staff person shall be available to residents twenty-four (24) hours per day. The client/ staff ratio shall not exceed twelve (12) clients to one (1) staff person.

The staff shall be composed of:

- A house manager; and
- Other staff sufficient to meet the client/staff standard.
- Staff should be knowledgeable about adolescent development and experienced in engaging and working with adolescents.

Frequency: A minimum of 5 hours per week of structured activities must be provided on each billable week.

Amount: Not to exceed two (3) episodes per year per client.

^{*}Self-help meetings may be included as part of structured activities

3.5 Clinically	SAPTA	Per ASAM Criteria Third Edition, Level 3.5 Adolescent, is a clinically managed high-	Intensity of service is
Managed		intensity residential program that is designed to serve individuals who, because of	dependent upon individual
Medium- High		specific functional limitations, need safe and stable living environments in order to	and presenting symptoms
Intensity		develop and/or demonstrate sufficient recovery skills so that they do not immediately	and whether the service is
Adolescent		relapse or continue to use in an imminently dangerous manner upon transfer to a less	medically necessary.
		intensive level of care. Effective treatment approaches are rehabilitative in focus,	D 4: 20 1
		addressing the patient's educational and vocational limitations, as well as his or her socially dysfunctional behavior, until the patient can be stabilized and is appropriately	Duration: 30 day maximum length of stay.
		transferred to a less intensive level of care. A unit consists of one day (24 hour period.	
			Amount: Not to exceed tw
		Clinically managed high intensity residential includes no less than 25 hours per week	(3) episodes per year per
		of counseling interventions. A minimum of 7 hours per day of structured activities	client.
		must be provided on each billable day. Intervention focuses on reintegration into the greater community with particular emphasis on education and vocational development.	
		This care approximates ASAM Criteria Third Edition	
		This care approximates Tist in Citetia Tima Edition	
		*Must be licensed by BHCQC	
		• Services: Elements of the assessment and treatment plan including a medical	
		evaluation within 48 hours preceding admission (or if a step down from another	
		residential setting, within 7 days preceding admission).	
		 Daily withdrawal monitoring assessments 	
		Ongoing screening for medical and nursing needs, with such medical and	
		nursing services available as needed through consultation or referral.	
		• 24 hour crisis management	
		Medical, psychiatric, psychological, services, which are available onsite or	
		through consultation or referral. Medical, medical procedures, and psychiatric	
		consultation are available within 24 hours by telephone or in person, within a	
		time frame appropriate to the severity and urgency of the consultation	
		 Individual, group, and/or family therapy 	
		 Family therapy: To be included during course of treatment as clinically 	
		indicated	
		Basic Skills Training	
		• Transportation	
		Peer to Peer	
		Medication Management (if necessary)	
		 Medical Services (these services must be available as per licensing 	
		requirements)	
		• Crisis Intervention (doesn't count against the required minimum service hours)	
		Psychosocial rehabilitation	
		• Structured Activities: 7 hours a day required. Example of activities:	

	1		1
		 Counseling Services Psycho education Employment Vocational training Recovery Support Services Recreation Random drug screenings Direct affiliation with other levels of care Motivational therapies and other evidence based practices are used *Self-help meetings may be included as part of structured activities Medical Services: Must be provided as per licensing requirements 	
Level 3.2-WM Clinically Managed Residential Withdrawal Management Adolescents	SAPTA	This care approximates ASAM Criteria Third Edition, Level 3.2-WM social withdrawal management and is a clinically managed withdrawal management service designed to explicitly to safely assist patients through withdrawal without the need for ready onsite access to medical and nursing personnel. This Level provides care to patients whose intoxication/withdrawal signs and symptoms are sufficiently severe to require 24-hour structure and support. At least one employee must be present 24 hours a day with appropriate clinical physician approved protocols. Protocols must also identify patients who are in need of medical services beyond the capacity of the social setting detoxification facility. Facilities that supervise self-administered medications have appropriately licensed or credentialed staff and policies and procedures in accordance with state and federal law. Clinicians must be able to obtain and interpret information regarding the signs and symptoms of intoxication and withdrawal, as well as the appropriate monitoring and treatment of those conditions and how to facilitate entry into ongoing care. Appropriately trained staff that is competent to implement physician-approved protocols for patient observation, supervision, treatment (including over he counter medications for symptomatic relief), and determination of the appropriate level of care, and facilitation of the patient's transition to continuing care. Access as needed, to medical evaluation and consultation, which are available 24 hours a day to monitor the safety and outcome of withdrawal management in this setting. *Must be licensed by BHCQC*	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed five (5) days unless medically necessary Frequency: NA Amount: Not to exceed three (3) visits per year.

Services:

- A range of cognitive, behavioral, medical, mental health, and pother therapies are administered to the patient on an individual or group basis. These are designed to enhance the patients understanding of addiction, the completion withdrawal management process, and referral to an appropriate level of care for continuing treatment.
- Addiction focused history, obtained as part of the initial assessment and reviewed by the physician during the admission process.
- A physical examination by a physician, physician's assistant, or nurse practitioner as part of the initial assessment, if self administered withdrawal management medications are to be used. Interdisciplinary individualized assessment and treatment plan.
- Sufficient bio psycho social screening assessment to determine the level of care in which the client should be placed and for the individualized care plan to address treatment priorities in Dimension 2 through 6.An individualized treatment plan including problem identification in Dimensions 2 through 6 and development of treatment goals and measurable treatment objectives and activities designed to meet these objectives.
- Daily assessment of the client's progress through withdrawal management and treatment changes.
- Discharge /transfer planning, beginning at admission.
- Referral arrangements documented as needed.
- Health education services.
- Services to family and significant others.
- Individual counseling
- Group Sessions
- Basic Skills training
- Crisis Intervention

Service	Service Code(s)	Description of Services	Utilization Management
		Women's Services	
Level 1 Outpatient	Individuals: H0047 Group: H0005	Non-residential specialized services on a scheduled basis for individuals with substance abuse problems or use disorders. Level I outpatient substance abuse services are provided in a SAPTA certified Outpatient facility which provides regularly scheduled individual, group and/or licensed family counseling. The program must provide, but is not limited to, professionally directed assessment/evaluation, group counseling, education, skill building, case management and individual counseling. Services may be provided to patients discharged from a more intensive level of care or for clients who are resistant to treatment or higher levels of care, but are not necessarily limited to this. This care approximates ASAM Criteria, Third Edition Services: • Substance abuse assessment • Comprehensive Evaluations (by the appropriately licensed staff) • Individualized Treatment Planning • Individual, group, and/or family therapy • Family: To be included during course of treatment as clinically indicated • Family education and information sessions as clinically indicated • Child Care • Gender Specific, parenting, trauma • Family Reunification *Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed days 1 year Frequency: Up to three (4) sessions per week. Amount: Not to exceed a total of 120 sessions
Level 2.I Outpatient		Non-residential specialized services on a scheduled basis for individuals with substance abuse problems or use disorders Intensive Outpatient (IOP) Substance abuse treatment is provided in a certified Level II facility which provides a broad range of highly clinically intensive clinical interventions. The program must provide but is not limited to professionally directed evaluation, group counseling, education, skill building, case management, and individual counseling. Services are provided in a structured environment for no less than nine (9) hours per week. Request for more than twelve (12) hours per week of services must be pre-approved.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed six (12) weeks.
		A minimum of three (3) hours of treatment services must be provided on each billable day and include one individual session per week. IOP treatment will generally include intensive, moderate and step down components. This care	Frequency: Up to four (4) sessions per week. Clinical interventions must last at

	approximates ASAM Criteria, Third Edition.	least 2 hours.
	Services: Substance abuse assessments Comprehensive Evaluations (by the appropriately licensed staff) Individualized treatment planning Case management Individual, group, and/or family therapy Family: To be included during course of treatment as clinically indicated Medical and psychiatric consultation Psychoparmacological consultation Medication management At hour crisis management Psychoeducation: Didactic sessions: 2 hours/week minimum Family education and information sessions as clinically indicated Primary Medical for women including prenatal care Primary pediatric care for dependent children including immunizations Childcare to the extent necessary to allow women with dependent children to utilize primary medical care and to utilize treatment for abuse of alcohol and other drugs *Twelve (12) Step Meetings or other Self-Help Meetings cannot be counted as billable Counseling Services.	Amount: Not to exceed a total of 48 sessions
Transitional Housing	Transition services consist of a supportive living environment for individuals who are receiving substance abuse treatment in an Intensive Outpatient, or Outpatient program and who are without appropriate living alternatives. The program activities are focused on problems in applying recovery skills, and should include but are not limited to referral and linkage, referral and coordination of care, client support and advocacy, self help meetings, monitoring and follow-up. This is the level that can only be reported for in conjunction with another level of treatment being provided at the same time (e.g. Level I or Level II outpatient. Frequency and service limits will depend on the level of care utilized; the ideal situation is that the client progress through a care continuum. A unit consists of one day (24 hour period).* Must meet HCQC requirements for licensure.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 180 days for one episdode. Frequency: Daily. Amount: Not to exceed two (2) episodes per year. Prior authorization will be required for all placements following the first episode

		Effective
Level 3.1-Low Intensity/Short Term Residential Womans	Low Intensity/Short term residential facilities provide living accommodations in a structured environment that encourages each client to assume responsibility for their own rehabilitation. Low-intensity residential treatment is provided in a licensed residential facility which provides room, board, and services designed to apply recovery skills, preventing relapse, improving emotional functioning, promoting personal responsibility and reintegrating the individual into work, education and family life. A minimum of 5 hours a week of structured activities must be provided on each billable week.	Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: Not to exceed 30 days.
	*Must be licensed by BHCQC Medical Services: Must be provided as per licensing requirements.	Frequency: A minimum of 4 hours per day of structured activities must be provided on each billable day.
	Services:	on each official day.
	 Basic Skills Training Transportation Peer to Peer Medication Management (if necessary) Medical Services (these services must be available per licensing requirements) Treatment and adjunct services shall not be provided but can be arranged for by the program if medically necessary. *Treatment services can be provided by treatment providers outside of the program. Half-way House Facilities shall encourage use of community resources by persons recovering from alcohol/drug use. There shall be written provisions for medical screening, care of clients requiring minor treatment or first aid and handling of medical emergencies. Progress of child or lack of progress is individually documented. Therefore separate clinical records are kept. Structured Activities: Employment Vocational training Recovery Support Services Recreation Parenting Skills, health parenting in Recovery Parent-child relationship Family education and information sessions as clinically indicated Primary Medical for women including prenatal care 	Amount: Not to exceed two (2) episodes per year per client.
	 Primary pediatric care for dependent children including immunizations Childcare to the extent necessary to allow women with dependent children to utilize primary medical care and to utilize treatment for 	

		abuse of alcohol and other drugs	
		*Self-help meetings may be included as part of structured activities	
3.5 Clinically Managed Medium- High Intensity Woman's	H0017		Intensity of service is dependent upon individual and presenting symptoms and whether the service is medically necessary. Duration: 60 day maximum length of stay. Amount: Not to exceed two (2) episodes per year per client.
		indicatedBasic Skills TrainingTransportation	
		Peer to Peer	

•	Medication Management	(if necessary)
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- Medical Services (these services must be available as per licensing requirements)
- Crisis Intervention (doesn't count against the required minimum service hours)
- Psychosocial rehabilitation
- Structured Activities: 7 hours a day required. Example of activities:
 - Counseling Services
 - Psycho education
 - Employment
 - Vocational training
 - Recovery Support Services
 - Recreation Counseling Services
 - Psycho education
 - Employment and Vocational training
 - Recovery Support Services
 - Recreation
 - Transportation
 - Peer to Peer
 - Medication Management (if necessary)
 - Medical Services (these services must be available per licensing requirements)
 - Family education and information sessions as clinically indicated
 - Primary Medical for women including prenatal care
 - Primary pediatric care for dependent children including immunizations
 - Childcare to the extent necessary to allow women with dependent children to utilize primary medical care and to utilize treatment for abuse of alcohol and other drugs
 - Transportation

Medical Services: Must be provided as per licensing requirements

^{*}Self-help meetings may be included as part of structured activities

Level of Care	Covered Services	Description of Treatment Level	Utilization Management
	Services	Recovery Support Services	
Peer to Peer	H0038		
Case Management	H0006	Currently not funded by SAPTA	
Drug and Alcohol	H0048	Currently not funded by SAPTA	
Testing			
Transportation	T2002	Currently not funded by SAPTA	
Child Care	T1009	Currently not funded by SAPTA	
Lodging	S9976	Room and board for Medicaid clients only.	Dependent upon the length
		Currently not funded by SAPTA	of stay authorized by
			Medicaid.